

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

10/518542

1 Date of Request:	2 Serial/Patent #
3 Please refund the following fee(s):	
Filing	4 PAPER NUMBER
Amendment	5 DATE FILED
Extension of Time	6 AMOUNT
Notice of Appeal/Appeal	\$
Petition	\$
Issue	\$
Cert of Correction/Terminal Disc.	\$
Maintenance	\$
Assignment	\$
Other	\$
7 TOTAL AMOUNT OF REFUND	
\$ 508	
8 TO BE REFUNDED BY:	
Treasury Check	
Credit Deposit A/C #:	
9 15--4030	
10 REASON:	
<input checked="" type="checkbox"/> Overpayment	
<input type="checkbox"/> Duplicate Payment	
No Fee Due (Explanation):	
11 REFUND REQUESTED BY:	
TYPED/PRINTED NAME: _____	
TITLE: _____	
SIGNATURE: <u>P. Klemm</u>	
PHONE: _____	
OFFICE: _____	
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****	
APPROVED: _____ DATE: _____	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B